interested in caregiving issues

- Health or social service professionals
  - ♦ Adult Day Care staff
  - ◆ Assisted Living staff
  - Home Care staff

    Adult Family Home Providers

Personal Care or COPES workers, Individual Providers, Home Health or

- disabilities

  In-home caregivers; Chore, Respite,
- ing parents

  Parents caring for adult children with
- senior with chronic illness or disability

  Adult children concerned about ag-
- ◆ Family caregivers caring for an adult or

Who Should Attend:

PRESORTED STANDARD US Postage PAID Olympia, Washington Permit 297

Aging & Disability Services Administration P.O. Box 45600 Olympia, WA 98504-5600

#### RESOURCE EXHIBITORS

AARP Washington
ARC of King County

Aging and Disability Services Administration
Alzheimer's Association/Western and Central WA

American Parkinson Disease Association

American Stroke Association-A Division of American Heart Association

Armstrong In-home Personal Care and Respite Services

Choice Medical Supplies, Inc.

Community Services for the Blind and Partially Sighted

Crisis Clinic Caregiver Program

Division of Developmental Disabilities, ADSA, DSHS

Elderhealth Northwest

GE Financial Long Term Care

Good Samaritan Community Services (Older Adult Services)

Good Samaritan Home Health and Hospice

Highline Specialty Center, Highline Community Hospital

Incontinent Solutions, Inc.

Korean Women's Association

Mental Health Division, DSHS

Multicare Adult Day Health/Home Health

National Alliance for the Mentally III

Pierce County Human Services, Aging and Long Term Care

Providence Home Services

Providence Hospice of Seattle

Senior Resource Care Services

Senior Services of Seattle-King County

Soundview Medical Supply

Village Green Retirement Campus

#### **CONFERENCE LOCATION:**

Tukwila Community Center, Tukwila, Washington. The center is approximately one mile off I-5, exit #156, and five miles from SeaTac Airport.

Detailed directions will be mailed with your confirmation. Special room rates and free shuttle service to the conference center are available at the SeaTac Area Courtyard by Marriott for overnight guests. The reduced rates will be offered until two weeks prior to the conference. For reservations, please call the Courtyard by Marriott at 1-800-321-2211. Tell the reservations desk you are attending the Caregiver Conference. Major resources and funding for this conference are provided by AARP Washington, Aging and Disability Services Administration, and the American Stroke Association-A Division of American Heart Association. We gratefully acknowledge the contributions and efforts of our many cosponsoring organizations and resource exhibitors, listed above.

Printing courtesy of AARP Washington

# Challenges In Caregiving: Giving Care, Taking Care

### **CONFERENCE HOSTS**



Aging and Disability Services Administration (ADSA), DSHS

American Stroke Association-A Division of American Heart Association

#### **CONTRIBUTORS**

Division of Developmental Disabilities, ADSA, DSHS

**Korean Women's Association** 

**Mental Health Division, DSHS** 

# A Conference for Caregivers

June 7, 2004

Tukwila Community Center Tukwila, Washington



#### **Challenges in Caregiving: Giving Care, Taking Care**

In this country, over eighty percent of all long-term care for older adults, or adults with disabilities, is provided in the community by family caregivers. Family and other caregivers need information and access to quality training to support them in their caregiving role.

This conference offers the community caregiver practical, up-to-date resources and skills to help them in their responsibilities. Dynamic speakers from a variety of backgrounds, including nursing, social work, pharmacy and law, will share their expertise and knowledge.

#### The Conference Plan

Twenty sessions, designed for family and paid home caregivers, are offered during the day. The curriculum is designed so that caregivers can choose the sessions they most need in their own situation.

A Resource and Information Exhibit will be open from 7:30AM-3:00PM. The Exhibit will include displays of products and helpful literature to enable the caregiver at home. Representatives from major health and social service organizations will be available to provide up-to-date information and problem-solving opportunities.

A reception for attendees, speakers and resource exhibitors is scheduled at 4:15PM. Join us for refreshments, door prizes and discussion.

#### **Accommodations for People with Disabilities**

The conference site is wheelchair accessible. Individuals who need reasonable accommodations (e.g., special seating, listening devices, etc.) should indicate the type of assistance needed on the registration form and mail by May 24, 2004. Conference staff will contact individuals and assist in making necessary arrangements.

# Continuing Education Hours

Those attending can receive certificates documenting five hours of training. This conference counts toward required continuing education (CE) hours for adult family home and boarding home caregivers. Individual providers and home care workers may be able to receive credit but should check with their Area Agency on Aging to see if it has been approved for CE in their area.

#### **Respite Care**

If family caregivers need help locating respite care for the impaired individual in order to attend this conference, they should mark the appropriate box on the registration form and mail *no later than May 24*. Conference staff will contact family caregivers to assist them in arranging respite care services.

#### **Registration Information**

**Register Early:** *Space is limited!* Registrations are accepted on a *first come*, *first serve basis. Preregistration deadline is May 24*, 2004. Late registration will be accepted as space allows. There will be no registration the day of the conference. After May 24, 2004, an additional "late fee" of \$5.00 per person will be requested.

You must preregister. No registration will be possible at the conference.

**Registration Fee:** Includes the day's workshops, luncheon, refreshments, resource exhibits and reception. If the fee is a hardship, unpaid family caregivers may request a full or partial scholarship (available on a limited basis).

**Confirmation:** A written confirmation with directions will be mailed for registrations received by May 24, 2004. If you haven't received your confirmation letter by June 1, please call 360-725-2544 or 800-422-3263. Please bring your confirmation letter along to simplify registration.

**Group Registrations:** Please register each individual attending the conference on a separate registration form. Registration forms may be photocopied as needed. Payment may be combined and attached to multiple registration forms stapled together. Be sure to indicate the agency name on the form and the check.

**Cancellation:** Fee is refundable if request is made by May 24, 2004. No refunds after this date.

## **Challenges in Caregiving Registration Form**

Monday, June 7, 2004 • Tukwila, Washington • Preregister by May 24, 2004

Please register only one person per registration form. Photocopy form for additional attendees. Phone \_\_\_\_ Name Agency Address □ Work □ Home \_\_\_\_\_ City/State/Zip \_\_\_\_ What county do you live in? **★** Please check the appropriate boxes below. Registration Fee includes luncheon, all workshops and reception. I am an individual caregiver: — \$25.00 Fee ☐ Family Caregiver (unpaid) □ Volunteer Caregiver ☐ Adult Family Home Provider ☐ Chore/Medicaid Individual Provider (not working for an agency) ☐ COPES Individual Provider \$50.00 Fee I work for an agency as: ☐ Home Health Aide ☐ Chore, COPES or Medicaid Personal Care Aide ☐ Respite Worker ☐ Assisted Living/Boarding Home staff ☐ Adult Day Care staff ☐ Geriatric Mental Health Specialist • Other social services or health professional **Circle your workshop choice** for each time period. If you aren't sure, please make your best guess! **Session A** (10:45AM–Noon) **A6 Session B** (1:30–2:45PM) **B**3 **B**4 **B5** B6 C2 **Session C** (3:00–4:15PM) C1 **C**3 C4 C5 C6 **Accommodations for people with disabilities** ☐ I will need **special accommodations** in order to attend this conference. Every effort will be made to provide reasonable accommodations for people with disabilities (e.g., special seating, listening devices, etc.) Send Registration by May 24, 2004, and you will be contacted by conference staff. Describe help needed: Respite care As an unpaid **family caregiver**, I will need help to provide care for my relative while I attend this conference. (Send Registration no later than May 24, 2004, and you will be offered information on resources that may assist you in making arrangements.) Describe help needed: **Meal selection** ☐ I prefer a vegetarian meal. How did you FIRST hear about this conference? ☐ AARP the Magazine ☐ Mailed brochure ☐ DSHS/ADSA Web site ☐ Friend/family ☐ Support group ☐ Daily newspaper ☐ Senior newspaper ☐ AARP Web site ■ Newsletter ☐ My workplace Have you attended this conference before? ☐ Yes ☐ No TOTAL ENCLOSED \$ Check #: No refunds after May 24, 2004 Please mail this Please make checks payable to American Heart Association registration to: American Heart Association (No purchase orders.)

708 Broadway, Suite 330, Tacoma, WA 98402-3378

Attn: Charlene Gillmore

Phone: 360-725-2544 or 800-422-3263